

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

Nail Trimmer

Attorney Docket Number::

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Fig. 7

Total Drawing Sheets::

2

Small Entity::

Y

Latin name::

Variety denomination name::

Petition included?::

Y

Petition Type::

37 CFR 1.102 based on age

Licensed US Govt. Agency::

No

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Applicant Information

| | |
|---|-------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | US |
| Status:: | FULL CAPACITY |
| Given Name:: | ROY |
| Middle Name:: | C. |
| Family Name:: | MARTIN |
| Name Suffix:: | JR. |
| City of Residence:: | GLENBURN |
| State or Province of Residence:: | MAINE |
| Country of Residence:: | US |
| Street of mailing address:: | 97 FRENCH'S POINT |
| City of mailing address:: | GLENBURN |
| State or Province of mailing address:: | MAINE |
| Country of mailing address:: | US |
| Postal or Zip Code of mailing address:: | 04401 |

Correspondence Information

| | |
|---|---|
| Correspondence Customer Number:: | |
| Name:: | Roy C. Martin, Jr. |
| Street of mailing address:: | 97 French's Point |
| City of mailing address:: | Glenburn |
| State or Province of mailing address:: | Maine |
| Country of mailing address:: | US |
| Postal or Zip Code of mailing address:: | 04401 |
| Phone number:: | 207-942-3996 |
| Fax Number:: | |
| E-Mail address:: | <u>handsome@midmaine.com</u> |

Representative Information

Representative Customer Number::

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date:: Priority Claimed::

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::